

**TOWN OF DAVIE
TOWN COUNCIL AGENDA REPORT**

TO: Mayor and Councilmembers

FROM/PHONE: Herb Hyman/1016

PREPARED BY: Herb Hyman

SUBJECT: Resolution

AFFECTED DISTRICT: n/a

ITEM REQUEST: **Schedule for Council Meeting**

TITLE OF AGENDA ITEM: SELECTION OF FIRM - A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRM OF COMMUNITY REDEVELOPMENT ASSOCIATES OF FLORIDA, INC. TO PROVIDE REHABILITATION OF SINGLE FAMILY HOMES SERVICES FOR THE NEIGHBORHOOD STABILIZATION PROGRAM AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH SERVICES.

REPORT IN BRIEF: The Town solicited competitive sealed proposals to provide rehabilitation of single family homes services for the Neighborhood Stabilization Program. RFP documents were sent to seventy-seven (77) prospective respondents. Additionally, the solicitation was advertised statewide in Florida Bid Reporting and nationally in BidNet and also posted on the Town's website. The Town received sixteen (16) responses. All proposals are available for viewing in the Purchasing Division. The selection committee short listed the top three firms to make an oral presentation. After hearing the oral presentations and reviewing the written proposals, the selection committee recommends Community Redevelopment Associates of Florida, Inc. in accordance with the attached scoring sheet. Upon approval of this resolution, the negotiation team will begin negotiating a contract with the selected firm and present that agreement for approval at a future meeting date.

PREVIOUS ACTIONS: n/a

CONCURRENCES: The selection committee scored Community Redevelopment Associates of Florida, Inc. as the highest scoring firm.

FISCAL IMPACT: Yes

Has request been budgeted? Yes

If yes, expected cost: To be negotiated with the selected firm

Account name and number: Housing and Community Development

RECOMMENDATION(S): Motion to approve resolution

Attachment(s): Procurement Authorization, Selection Committee Ranking Sheet,
Incorporation Information

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRM OF COMMUNITY REDEVELOPMENT ASSOCIATES OF FLORIDA,, INC. TO PROVIDE REHABILITATION OF SINGLE FAMILY HOMES SERVICES FOR THE NEIGHBORHOOD STABILIZATION PROGRAM AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH SERVICES.

WHEREAS, the Town solicited proposals to provide rehabilitation of single family homes services for the Neighborhood Stabilization Program; and

WHEREAS, the selection committee has selected Community Redevelopment Associates of Florida, Inc. as the firm best qualified to provide the required services; and

WHEREAS, it is in the Town's best interest to execute a contract for such services.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council of the Town of Davie does hereby accept the selection of Community Redevelopment Associates of Florida, Inc. as the firm best qualified to provide the required services and authorizes the Town Administrator or his designee to negotiate an agreement for such services and present that contract for approval at a future meeting date. Should no agreement be reached with the highest ranking firm, then the Town Administrator or his designee shall negotiate with the next ranked firm and present that agreement for approval.

SECTION 2. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS _____ DAY OF
_____, 2009

Attest:

MAYOR/COUNCILMEMBER

TOWN CLERK

APPROVED THIS _____ DAY OF _____, 2009

TOWN OF DAVIE PROCUREMENT AUTHORIZATION

<u>ACCOUNT NUMBER</u>	<u>BUDGET ITEM & DESCRIPTION</u>	<u>APPROXIMATE COST</u>
	Request for Qualifications NSP Single-family Rehabilitation Program	

METHOD OF PROCUREMENT (check the one that applies)

☐ Open Competitive Bidding
☐ Piggyback on Contract Number
☐ Sole Source
☒ Request For Proposals

SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED

Signed _____
Department Head:

Have Funds been Reserved N/A - NO ACCOUNT OR AMOUNT USED

Date 3/19/09 Signed AM

Signed Mary Shannon
Town Administrator

<u>BIDS SUBMITTED</u>	<u>VENDOR</u>	<u>COST</u>
	CRA OF FLORIDA, INC.	RANKED 1 ST
	NEW COMMUNITY STRATEGIES	RANKED 2 ND
	ROBERT McDONALD & ASSOCIATES	RANKED 3 RD
	RJS CONSTRUCTION	NOT RANKED
	SOFL CORPORATION	NOT RANKED
	TREND CONSTRUCTION GROUP	NOT RANKED
	M+A CREATIONS	NOT RANKED
	BLACK BIDDY, INC.	NOT RANKED
	PERSPECTIVE 3000	NOT RANKED
	NYC BUILDERS	NOT RANKED
	WILHAM + ASSOCIATES	NOT RANKED
	GIL VALDES	NOT RANKED
	SSAEC ENG. CORP.	NOT RANKED Signed _____
	BNB CONSTRUCTION	NOT RANKED
	EAST COAST CONTRACTORS	NOT RANKED
	BROWNS MINORITY BUILDERS	NOT RANKED

Procurement Manager

BID SPECIFICATION COMMITTEE'S RECOMMENDATION

<u>Vendor</u>	<u>Cost</u>
CRA OF FLORIDA, INC.	RANKED 1 ST

BID OPENING REPORT

BID NAME: Rehab of Single Family Homes

TIME: 2:10 PM

BID NUMBER: B-09-64

DATE: 5-26-09

ESTIMATED COST: _____

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	RJS Construction Group		
2.	SoFI Corporation	<i>See Attached proposals</i>	
3.	Trend Construction Group		
4.	H & A Creations Construction		
5.	CRA of FL., Inc.		
6.	Black Bidly Inc.		
7.	Perspective 3000		
8.	N4C Builders, Inc.		
9.	New Community Strategies		
10.	William & Associates		

REMARKS

SPECS WERE SENT TO SEVENTY-SEVEN (77) RESPECTIVE BIDDERS
TOWN REC'D SIXTEEN (16) PROPOSALS

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: Angie Salencia

DATE: 5-26-09

WITNESS: [Signature]

DATE: 5-26-09

BID NAME: Rehab of Single Family Homes

BID OPENING REPORT

BID NUMBER: B-09-64

TIME: 2:10pm

DATE: 5-26-09

ESTIMATED COST: _____

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	Gil Valdes		
2.	Robert McDonalds & Assoc.		
3.	Sealtec Eng. Corp.		
4.	BNB Construction		
5.	East Coast Contractors		
6.	Broward Co. Minority Builders Coalition		
7.			
8.			
9.			
10.			

REMARKS

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: Gerda Salinas

DATE: 5-26-09

WITNESS: Elina Blackston

DATE: 5-26-09

	A	B	C	D
1				
2				
3		REHAB SINGLE FAMILY HOUSES		
4		NEIGHBORHOOD STABILIZATION PROGRAM		
5				
6	COMMITTEE MEMBER	CRA	ROBERT	NEW COMM
7		OF FL	MCDONALD	STRATEGIES
8				
9	W. ACKERMAN	95	63	88
10	R. MUNIZ	95	85	90
11	M. DIEZ	90	60	75
12	L. NGUYEN	85	85	70
13	B. HITCHCOCK	90	90	85
14	B. SPIWAK	95	70	85
15	H. HYMAN		ABSTAIN	
16				
17	TOTAL	550	453	493
18				
19	RANKING	1 ST	3 RD	2 ND
20				

**Request for Taxpayer
Identification Number and Certification**

Give form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return) Community Redevelopment Associates of Florida, Inc.	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
	Address (number, street, and apt. or suite no.) 8569 Pines Boulevard, Suite 201	
	City, state, and ZIP code Pembroke Pines, FL 33024	
List account number(s) here (optional)		Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
or
Employer identification number
65 0216617

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶ 	Date ▶ 5/22/09
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

I, Martin Larsen, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the
Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: CRA of Florida, Inc.
Address: 8569 Pines Boulevard, Suite 201
Pembroke Pines, FL 33024
FEIN 650216617
State and date of incorporation Florida - 4/18/1990

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Martin Larsen	8569 Pines Blvd. Suite 201, Pembroke Pines, FL 33024	45 %
Early Johnson	8569 Pines Blvd. Suite 201, Pembroke Pines, FL 33024	45 %
Andrew Azebeokhai	8569 Pines Blvd. Suite 201, Pembroke Pines, FL 33024	10 %
		%

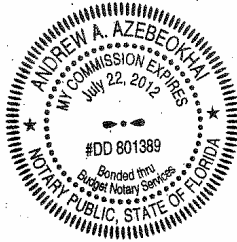
2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address

Signature of Grant

M. Larsen
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 22 day of
May 2009, by MARTIN LARSEN he/she is
personally known to me or has presented _____ as
identification.



[Signature]
Notary Public, State of Florida at Large

Print or Stamp of Notary

Serial Number

My Commission Expires

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Detail by Entity Name

Florida Profit Corporation
COMMUNITY REDEVELOPMENT ASSOCIATES OF FLORIDA, INC.

Filing Information

Document Number L66074
FE/EIN Number 650216617
Date Filed 04/18/1990
State FL
Status ACTIVE

Principal Address

8569 PINES BLVD.
#201
HOLLYWOOD FL 33024
Changed 04/23/2008

Mailing Address

8569 PINES BLVD.
#201
HOLLYWOOD FL 33024
Changed 04/23/2008

Registered Agent Name & Address

LARSEN, MARTIN R
8569 PINES BLVD.
SUITE 201
HOLLYWOOD FL 33024 US
Name Changed: 02/10/2003
Address Changed: 04/23/2008

Officer/Director Detail

Name & Address
Title CPD
LARSEN, MARTIN R
304 SW 85 TERRACE #310

PEMBROKE PINES FL 33025

Title VD

AZEBOEKHAI, ANDREW
7630 NW 11 PLACE
PLANTATION FL 33322

Title VSTD

JOHNSON, EARLY
4429 NW 41 ST. PLACE
COCONUT CREEK FL 33073**Annual Reports****Report Year Filed Date**

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2008	04/23/2008
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